

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Senate Conservatives Fund

ADDRESS (number and street)

228 S. Washington St., Ste. 115

☐Check if different  
than previously  
reported. (ACC)

Alexandria

VA

22314

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00448696

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

10

16

2008

through

11

24

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Lisa Lisker, Assistant Treasurer

Signature of Treasurer

Electronically Filed by Lisa Lisker, Assistant Treasurer

Date

12

04

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Senate Conservatives Fund

Report Covering the Period:

From:

M M D D Y Y Y Y  
1 0 1 6 2 0 0 8

To:

M M D D Y Y Y Y  
1 1 2 4 2 0 0 8

	<b>COLUMN A</b> This Period	<b>COLUMN B</b> Calendar Year-to-Date
6. (a) Cash on Hand January 1 <input type="text" value="2008"/>		<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period .....	<input type="text" value="37338.61"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="95287.85"/>	<input type="text" value="205664.26"/>
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<input type="text" value="132626.46"/>	<input type="text" value="205664.26"/>
7. Total Disbursements (from Line 31) .....	<input type="text" value="36689.74"/>	<input type="text" value="109727.54"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<input type="text" value="95936.72"/>	<input type="text" value="95936.72"/>
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)**For further information contact:**Federal Election Commission  
999 E street, NW  
Washington, DC 20463Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name  
Senate Conservatives Fund

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	1	6	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
1	1	2	4	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	3500.00	42600.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	89287.85	94838.50
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	92787.85	137438.50
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	2500.00	41250.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤	95287.85	178688.50
12. Transfers From Affiliated/Other Party Committees .....	0.00	26975.76
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	95287.85	205664.26
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	95287.85	205664.26

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	17557.72	72329.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	17557.72	72329.59
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	15000.00
24. Independent Expenditure (use Schedule E) .....	14132.02	22397.95
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	36689.74	109727.54
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	36689.74	109727.54

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	95287.85	178688.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	95287.85	178688.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	17557.72	72329.59
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	17557.72	72329.59

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 13

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Senate Conservatives Fund

**A.**

Full Name (Last, First, Middle Initial)

Daniel Mattoon

Mailing Address 6344 Cavalier Corridor

City

Falls Church

State

VA

Zip Code

22044-1203

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 4 / 2 0 0 8

Transaction ID: 81204.C166

Amount of Each Receipt this Period

3000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Karen Stamm

Mailing Address 6312 Hillcrest PI

City

Alexandria

State

VA

Zip Code

22312-1233

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: 81204.C168

Amount of Each Receipt this Period

500.00

Earmarked(Non-Directed)

**C.**

Full Name (Last, First, Middle Initial)

Statecard.com PAC

Mailing Address 228 S Washington St Ste 115

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

C

C00438549

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: CM881204.C168

Amount of Each Receipt this Period

500.00

Memo - Conduit memo total

**[MEMO ITEM]**

Earmarked Memo - Conduit  
total

**SUBTOTAL** of Receipts This Page (optional) .....

3500.00

**TOTAL** This Period (last page this line number only) .....

3500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 13

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Senate Conservatives Fund

**A.**

Full Name (Last, First, Middle Initial)

Microsoft Corp. PAC

Mailing Address 16011 NE 36th Way

City

Lynnwood

State

WA

Zip Code

98037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 0 8

Transaction ID: 81204.C173

Amount of Each Receipt this Period

2500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

2500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 / 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Senate Conservatives Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) American Express	Transaction ID: 81204.E57 Date of Disbursement 11 / 17 / 2008
Mailing Address PO Box 650448		
City Dallas State TX Zip Code 75265-0448		Amount of Each Disbursement this Period
Purpose of Disbursement See Memos		3627.03
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SEE MEMOS
<b>B.</b>	Full Name (Last, First, Middle Initial) Foley & Lardner	Transaction ID: 81204.E48 Date of Disbursement 11 / 03 / 2008
Mailing Address 3000 K St NW Ste 500		
City Washington State DC Zip Code 20007-5111		Amount of Each Disbursement this Period
Purpose of Disbursement Legal Fees		2460.00
Candidate Name		001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	LEGAL FEES
<b>C.</b>	Full Name (Last, First, Middle Initial) Huckaby Davis Lisker	Transaction ID: 81204.E49 Date of Disbursement 11 / 03 / 2008
Mailing Address 228 S Washington St Ste 115		
City Alexandria State VA Zip Code 22314-5404		Amount of Each Disbursement this Period
Purpose of Disbursement Accounting/Compliance		1758.00
Candidate Name		001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	ACCOUNTING/COMPLIANCE

SUBTOTAL of Disbursements This Page (optional) .....

7845.03

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Senate Conservatives Fund

**A.**

Full Name (Last, First, Middle Initial)  
Mike Gula & Assoc.

Mailing Address 700 12th St NW Ste 700

City Washington State DC Zip Code 20005-4052

Purpose of Disbursement  
Blast email

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 81204.E52

Date of Disbursement

11 / 03 / 2008

Amount of Each Disbursement this Period

33.51

BLAST EMAIL

**B.**

Full Name (Last, First, Middle Initial)  
Mike Gula & Assoc.

Mailing Address 700 12th St NW Ste 700

City Washington State DC Zip Code 20005-4052

Purpose of Disbursement  
PAC Fundraising Consulting

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 81204.E56

Date of Disbursement

11 / 14 / 2008

Amount of Each Disbursement this Period

4175.00

PAC FUNDRAISING CONSULTING

**C.**

Full Name (Last, First, Middle Initial)  
NEBS

Mailing Address 500 Main St

City Groton State CT Zip Code 01471-0001

Purpose of Disbursement  
Office Supplies

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 81204.E47

Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

245.75

OFFICE SUPPLIES

**SUBTOTAL** of Disbursements This Page (optional) .....

4454.26

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 13

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Senate Conservatives Fund

**A.**

Full Name (Last, First, Middle Initial)

Greg Ramsey

Mailing Address 18 Ashwicke Ln

City  
Greenville

State  
SC

Zip Code  
29615-3842

Purpose of Disbursement  
Print Design

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 81204.E55

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3607.00

PRINT DESIGN

**B.**

Full Name (Last, First, Middle Initial)

Reflections Photography

Mailing Address 631 Pennsylvania Ave SE

City  
Washington

State  
DC

Zip Code  
20003-4303

Purpose of Disbursement  
Event Photography

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 81204.E51

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

EVENT PHOTOGRAPHY

**C.**

Full Name (Last, First, Middle Initial)

Slatecard.com PAC

Mailing Address 228 S Washington St Ste 115

City  
Alexandria

State  
VA

Zip Code  
22314-5404

Purpose of Disbursement  
Credit Card Processing

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 81204.E44

Date of Disbursement

/   /

Amount of Each Disbursement this Period

251.78

CREDIT CARD PROCESSING

**SUBTOTAL** of Disbursements This Page (optional) .....

4258.78

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Senate Conservatives Fund

**A.**

Full Name (Last, First, Middle Initial)  
Slatecard.com PAC

Mailing Address 228 S Washington St Ste 115

City Alexandria State VA Zip Code 22314-5404

Purpose of Disbursement  
Credit Card Processing

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 81204.E45

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

147.41

CREDIT CARD PROCESSING

**B.**

Full Name (Last, First, Middle Initial)  
Under the Power Lines

Mailing Address 807 Gervais St Ste 202

City Columbia State SC Zip Code 29201-3163

Purpose of Disbursement  
Web Services

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 81204.E53

Date of Disbursement

11 / 03 / 2008

Amount of Each Disbursement this Period

800.00

WEB SERVICES

**C.**

Full Name (Last, First, Middle Initial)  
Verizon Wireless

Mailing Address PO Box 25505

City Lehigh Valley State PA Zip Code 18002-5505

Purpose of Disbursement  
PAC Cell Phone

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 81204.E50

Date of Disbursement

11 / 03 / 2008

Amount of Each Disbursement this Period

52.24

PAC CELL PHONE

**SUBTOTAL** of Disbursements This Page (optional) .....

999.65

**TOTAL** This Period (last page this line number only) .....

17557.72

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 13

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Senate Conservatives Fund

A.

Full Name (Last, First, Middle Initial)  
Jim Risch for US Senate

Mailing Address PO Box 1247

City State Zip Code  
Boise ID 83701-1247

Purpose of Disbursement  
Contrib-2008 G

Candidate Name  
JAMES E RISCH

Office Sought: ☐ House  
☒ Senate  
☐ President

State: ID District: 00

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: 81022.E40

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2008

Amount of Each Disbursement this Period

5000.00

CONTRIB-2008 G

SUBTOTAL of Disbursements This Page (optional) .....

5000.00

TOTAL This Period (last page this line number only) .....

5000.00

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Senate Conservatives Fund		<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00448696	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Tele Town Hall		Date M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 8	
Mailing Address 5101 Macarthur Blvd NW Ste 200		Amount 14132.02	
City Washington		State DC	
Zip Code 20016-3315		<b>Transaction ID:</b> 81204.E54	
Purpose of Expenditure Voter Calls		Office Sought: <input type="checkbox"/> House State: CO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> Presidential	
Category/ Type			
Name of Federal Candidate supported or Opposed by expenditure: ROBERT W SCHAFFER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
22397.95			

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	14132.02
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	14132.02
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Lisa Lisker, Assistant Treasurer Signature	Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8